

Week 1 - 11/15

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELICOTT CITY, MD 21043
PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810
AUTOMATED INFORMATION (410) 313-3850

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B00157985

Building Address 13467 Brighton Dam
Clarksville MD 21029
Suite/Apt. # 05-37976 SDP/WP/Petition # _____
Census Tract 605101 Subdivision Chris Mac Estates
Section _____ Area _____ Lot 19
Tax Map 34 Parcel 367 Grid 9
Zoning RR-DEP Map Coordinates _____ Lot size 1.12A

Property Owner's Name John DAVIS
Address 13467 Brighton Dam Rd
City Clarksville State MD Zip Code 21029
Home Phone _____ Work Phone _____
Applicant's Name & Mailing Address, (if other than stated hereon):
Potts Const. Co. Inc.
6592 Milk Hollow R.
Phone _____ Fax _____

Existing Use 1 story garage SFD
Proposed Use 1 story garage w/ storage
Estimated Construction Cost \$ _____
Description of Work remove existing roof
trusses & replace w/ attic
storage truss / access pulldown
24 x 31 Attic Storage

Contractor Company Potts Const Co.
Contact Person Jim
Address Same
City _____ State _____ Zip Code _____
License No. 5711
Phone _____ Fax _____

Occupant or Tenant _____
Contact Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

Engineer or Architect Company N/A
Contact Person _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: <u>31</u> <u>36</u> 2nd floor: <u>N/A</u> <u>N/A</u> Basement: <u>N/A</u> <u>N/A</u>	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/> Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____ Height: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____ State Certified Modular _____ Manufactured Home _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature [Signature]
Title/Company Pres. P.C. Co.

Print Name JAMES POTTS
Date 1/26/06

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
** PLEASE WRITE NEATLY AND LEGIBLY. **
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE/ APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development, DPZ	<u>2/1/06</u>	<u>[Signature]</u>	Front: <u>75</u>	Filing fee \$ <u>25</u>
State Highways			Rear: <u>30</u>	Permit fee \$ <u>134</u>
Building Official	<u>2/1/06</u>	<u>[Signature]</u>	Side: <u>30</u>	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: <u>N/A</u>	Add'l per. fee \$ <u>14</u>
Health	<u>2/1/06</u>	<u>[Signature]</u>	All minimum setbacks met?	TOTAL FEES \$ _____
Fire Protection			YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance?			Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Check # _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
Distribution of Copies -			Lot Coverage for NewTown Zone <u>N/A</u>	
White: Building Official			SDP/Red-line approval date _____	Accepted by _____
Green: LDD, DPZ				
Yellow: DED, DPZ				
Pink: Health				
Gold: SHA				

PROPERTY KNOWN AS: LOT 19
SECTION ONE
"CHRIS MAR ESTATES"
ELECTION DISTRICT
HOWARD COUNTY, MD

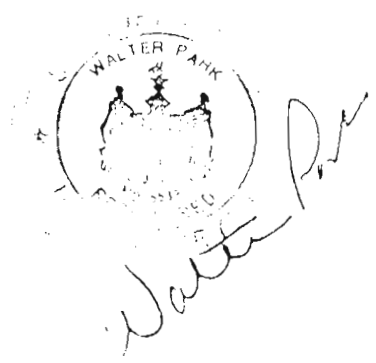
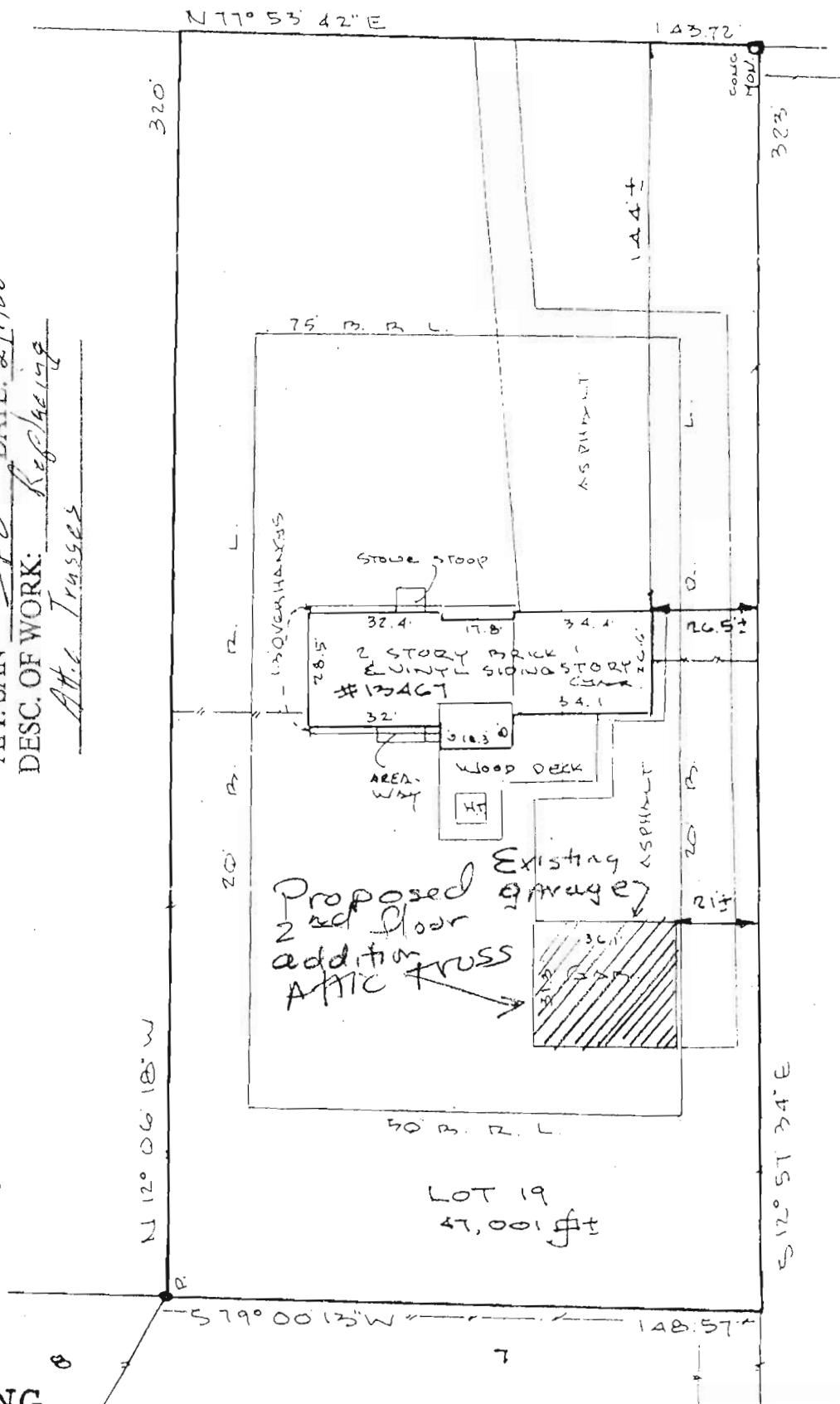
THIS PLAT CAN NOT BE USED TO ESTABLISH
PROPERTY LINES OR CORNERS.

D
PLAN 3128

BRIGHTON DAM ROAD



APPROVED
WALK-THRU BUILDING PERMIT
BP# BM57985 A# 24213
APP. SAN SFO DATE: 2/1/06
DESC. OF WORK: Replacing
Att. Trusses



LOCATION DRAWING

CERTIFICATION	SEAL	SCALE 1"=40'	DATE
<p>I am to certify that I have surveyed the property known as: <u>13467 BRIGHTON DAM ROAD</u></p> <p>The information shown has been established by current acceptable survey procedures and from available record information. This drawing is to be used for Title Transfer Financing, or Refinancing Only and IS NOT to be used for the Establishment of Property Lines, Location of Fences, Garages, Buildings, or other Existing or Future Improvements.</p>	<p><i>Walter Park</i></p>	<p>LDE Inc. 9250 Rumsey Road Suite 106 Columbia, Maryland 21045</p> <p>(410) 715-1070 (Balt.) (301) 596-3424 (Wash.) (410) 715-9540 (Fax)</p>	

24213 Waltham

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3800 COURT HOUSE DRIVE ELKLOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1819 AUTOMATED INFORMATION (410) 313-3800		HOWARD COUNTY PERMIT APPLICATION		PERMIT NUMBER 306003348	
Building Address <u>13467 Brighton Dam Rd</u> <u>Clarksville MD 21029</u>			Property Owner's Name <u>John Davis</u>		
Suite/Apt. #: _____ SDP/WP/Petition #: _____			Address <u>13467 Brighton Dam Rd</u>		
Census Tract _____ Subdivision _____			City <u>Clarksville MD</u> State _____ Zip Code <u>21029</u>		
Section _____ Area _____ Lot _____			Home Phone <u>240-375-1141</u> Work Phone <u>301-464-1800</u>		
Tax Map _____ Parcel _____ Grid _____			Applicant's Name & Mailing Address, (if other than stated hereon): _____		
Zoning _____ Map Coordinates _____ Lot size _____			Phone _____ Fax _____		
Existing Use <u>Single Family Dwelling</u>			Contractor Company <u>OWNER</u>		
Proposed Use <u>Same</u>			Contact Person _____		
Estimated Construction Cost \$ <u>10,000.00</u>			Address _____		
Description of Work <u>Ready Made</u> <u>Storage Shed 2 -</u> <u>12x28 to store junk</u>			City _____ State _____ Zip Code _____		
Occupant or Tenant _____			License No. _____		
Contact Name _____			Phone _____ Fax _____		
Address _____			Engineer or Architect Company _____		
City _____ State _____ Zip Code _____			Contact Person _____		
Phone _____ Fax _____			Address _____		
City _____ State _____ Zip Code _____			City _____ State _____ Zip Code _____		
Phone _____ Fax _____			Phone _____ Fax _____		

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private	SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private	1st floor: _____ 2nd floor: _____ Basement: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawlspace <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms: _____ Height: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>	Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____	Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____

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John Davis
 Applicant's Signature Print Name John Davis
Date Aug 17, 2006
 Title/Company _____

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY. **
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#:	
Land Development DPZ			Front: _____	Filing fee \$ _____	
State Highways			Rear: _____	Permit fee \$ _____	
Building Official			Side: _____	Excise tax \$ _____	
Dev. Engineering DPZ			Side St.: _____	Add'l per. fee \$ _____	
Health	<u>8/17/06</u>	<u>[Signature]</u>	All minimum setbacks met?	TOTAL FEES \$ _____	
Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____	
Is Sediment Control approval required prior to issuance?			Is Entrance Permit required?	Balance due \$ _____	
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # _____	
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____	
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>		
Distribution of Copies:	White: Building Official	Green: LDD, DPZ	Yellow: DED, DPZ	Pink: Health	Gold: SHA
Accepted by _____			SDP/Red-line approval date _____		

PROPERTY KNOWN AS: LOT 19
SECTION ONE
"CHRIS MAP ESTATES"
5TH ELECTION DISTRICT
HOWARD COUNTY, MD

THIS PLAT CAN NOT BE USED TO ESTABLISH
PROPERTY LINES OR CORNERS.

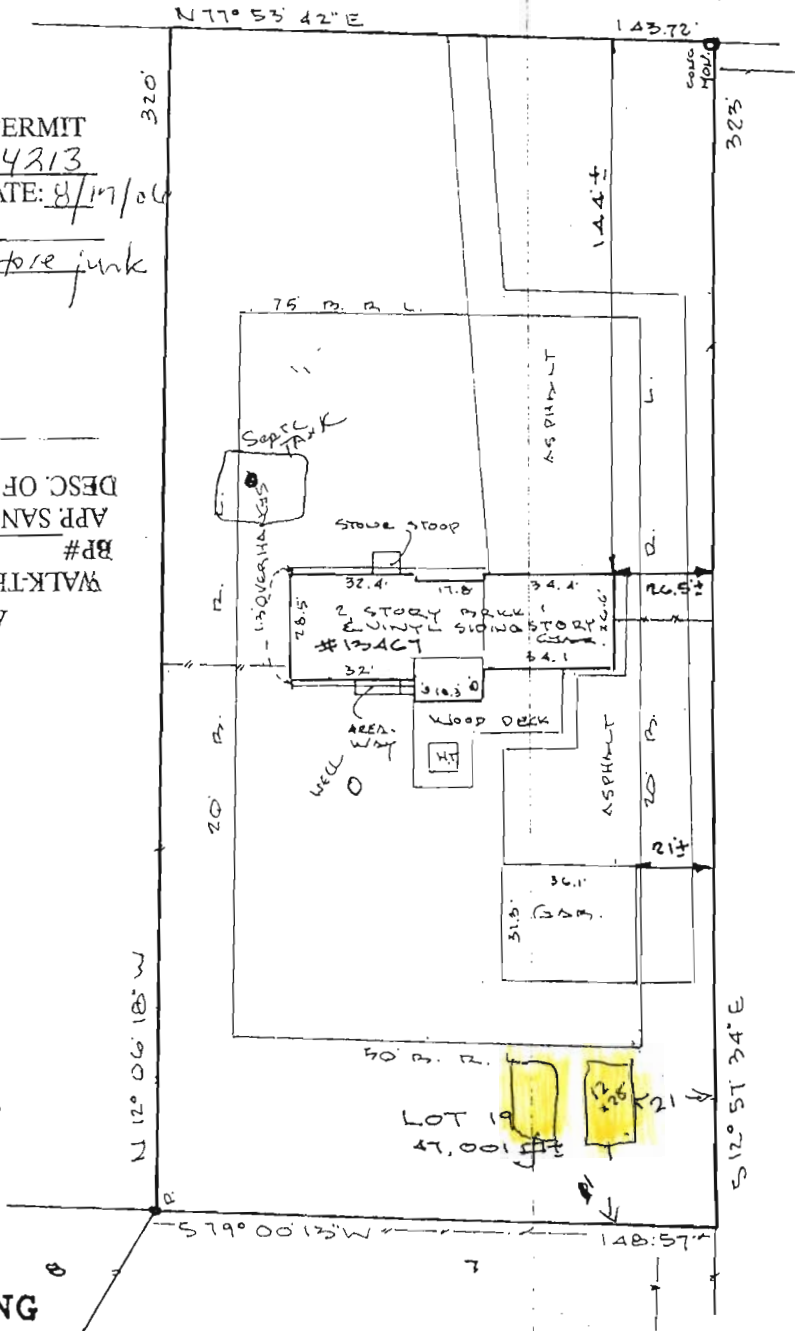
D
PLAN 3128

BRIGHTON DAM ROAD



APPROVED
WALK-THRU BUILDING PERMIT
BP# _____ A# 24213
APP. SAN SF DATE: 8/17/06
DESC. OF WORK:
2 12' x 28' to store junk

APPROVED
WALK-THRU BUILDING PERMIT
BP# _____ A# _____
APP. SAN _____ DATE: _____
DESC. OF WORK: _____



LOCATION DRAWING

CERTIFICATION	SEAL	SCALE 1" = 40'	DATE
<p>This is to certify that I have surveyed the property known as: <u>12467 BRIGHTON DAM ROAD</u></p> <p>The information shown has been established by current acceptable survey procedures and from available record information. This drawing is to be used for Title Transfer Financing, or Refinancing Only and IS NOT to be used for the Establishment of Property Lines, Location for Fences, Garages, Buildings, or other Existing or Future Improvements.</p>	 <i>Walter Park</i>	<p>LDE Inc. 9250 Rumsey Road Suite 106 Columbia, Maryland 21045</p> <p>(410) 715-1070 (Balt.) (301) 596-3424 (Wash.) (410) 715-9540 (Fax)</p>	